COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature ■ Complete items 1, 2, and 3. □ Agent Print your name and address on the reverse X ☐ Addressee so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: If YES, enter delivery address below: Dell EMC 176 South Street : ... Hopkinton, MA 01748 3. Service Type □ Adult Signature ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted
Delivery
☐ Return Receipt for
Merchandise Adult Signature Restricted Belivery
 Certifled Mail® Cottline Mail Restricted Delivery
Collection Delivery
Collection Delivery Restricted Delivery 9590 9402 3073 7124 2444 45 ☐ Signature Confirmation™
☐ Signature Confirmation
Restricted Delivery 2. Article Number (Transfer from service label) ☐ Insured Mail
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Domestic Return Receipt

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N.D. OF ALABAMA